

**MAINE DEPARTMENT OF CORRECTIONS  
EMERGENCY OBSERVATION STATUS PLACEMENT**

**SECTION A: Placement**

At 1250 hours on 3-<sup>5e</sup>2014 I have ordered the placement of prisoner

Condon, J. MDOC # 2425 Housing Unit Close

on emergency observation status, based on one or more of the following criteria:


#		Reason for Placement
1	<input type="checkbox"/>	The prisoner may constitute an escape risk if in a less restrictive status
2	<input checked="" type="checkbox"/>	The prisoner may pose a threat to the safety of others if in a less restrictive status
3	<input type="checkbox"/>	The prisoner may pose a threat to his/her own safety if in a less restrictive status
4	<input type="checkbox"/>	There may be a threat to the safety of the prisoner if in a less restrictive status

The factual basis for placement is: (include specifics such as date, time and place of any incident)

Prisoner placed on EOS pending IPS investigation due to reports from staff.

Dated: 3-<sup>5e</sup>14

Sgt. Cox  
Staff Ordering Placement

  
U.M. Mendez  
Shift Commander, Unit Manager, Deputy Chief  
Administrative Officer or Chief Administrative  
Officer

☒ Incident report completed in CORIS 2014-2130

☐ Rationale for placement read to prisoner and prisoner received a copy of this notice on:

3/5/14 at 1300 by AA  
Date Time Staff providing notice

\*\*\*\*\*  
REVIEW OF EMERGENCY OBSERVATION STATUS (TO BE DONE WITHIN 72 HOURS OF PLACEMENT)

- ☐ REMOVE FROM EMERGENCY OBSERVATION STATUS  
☐ RETAIN ON EMERGENCY OBSERVATION STATUS PENDING REVIEW BY UNIT TEAM

Rationale: \_\_\_\_\_

Date & Time \_\_\_\_\_

Unit Manager, Shift Commander,  
Deputy Chief Administrative Officer  
or Chief Administrative Officer

**IF PRISONER IS RETAINED ON EMERGENCY OBSERVATION STATUS, PLEASE COMPLETE SECTION B OF THIS FORM**

EMERGENCY OBSERVATION STATUS PLACEMENT FORM

DOC FORM

A - 15.1 - A - A - 8/19/11

Page 1 of 2

Distribution: Copies to: Prisoner, Shift Commander, Housing Unit's Emergency Observation Status Binder, SMU Unit Manager, if applicable  
Original (with original Preliminary Individualized Plan) to: Unit Manager

**MAINE DEPARTMENT OF CORRECTIONS  
EMERGENCY OBSERVATION STATUS PLACEMENT**

Prisoner	MDOC #
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**SECTION B: Notification of Review by Unit Management Team(s)**

The Unit Management Team(s) will hold a review in regard to the above prisoner's placement on

emergency observation status on	at
Date	Time
in	
Place	

Prisoner received a copy of this notice on	at
Date	Time

and advised that he/she may submit a written statement regarding the rationale for placement on emergency observation status.

by \_\_\_\_\_  
Staff providing notice

PAUL R. LePAGE  
GOVERNOR

STATE OF MAINE  
DEPARTMENT OF CORRECTIONS



JOSEPH PONTE  
COMMISSIONER

MAINE STATE PRISON  
TEL: (207) 273-5300

BOLDUC CORRECTIONAL  
FACILITY  
TEL: (207) 273-2036

To: Sgt Cox  
From: U.M Mendez  
CC: File  
Ref: Prisoner Condon #2425

This is a summary of a confidential report that was submitted on prisoner Condon. Information was received that this prisoner was going to kill U.M. Harris. Based on the information that was received and knowing that the prisoner did not like talking to U.M Harris, I recommend that the prisoner be placed in SMU on EOS status

**MAINE DEPARTMENT OF CORRECTIONS  
EMERGENCY OBSERVATION STATUS REVIEW MINUTES**

Members: Sgt Cox Date: 3-6-2014  
CCTV LONDON Place: SMU  
OFFICER GORDON  
 Prisoner: CONDON, J. MDOC #: 2425

**I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Placement form) and any additional information received since placement:**

<u>PRISONER PLACED ON EOS PENDING IPS INVESTIGATION</u>
<u>DUE TO REPORTS FROM STAFF</u>

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

**II. Prisoner's Statement**

<u>PRISONER STATES HE IS NOT AWARE OF HIS</u>
<u>REASON FOR BEING ON EOS STATUS.</u>

☐ Attachment(s), specify: \_\_\_\_\_

**III. Unit Management Team's Decision and Its Reason(s)**

- ☐ Remove from Emergency Observation Status  
☒ Retain on Emergency Observation Status (up to 72 hours from time of placement on emergency observation status)  
☐ Recommend Placement on Administrative Segregation Status

Reason(s): <u>PENDING IPS INVESTIGATION.</u>

☐ Individualized Plan attached.

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**  
3-6-2014 at 0912  
 Date Time

**V. If Unit Management Team recommends placement on administrative segregation status, Chief Administrative Officer's, or Designee's Review**

- ☐ Remove from emergency observation status  
☐ Recommend to Commissioner, or designee, placement on administrative segregation status

Commissioner's, or designee's, Decision ☐ Placement Approved ☐ Placement Denied

Date \_\_\_\_\_

Signature \_\_\_\_\_

EMERGENCY OBSERVATION STATUS REVIEW MINUTES

DOC FORM

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Distribution: Copies to: Prisoner, Shift Commander, Housing Unit's Emergency Observation Status binder, SMU Unit Manager, if applicable

Original: Unit Manager

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**MAINE DEPARTMENT OF CORRECTIONS  
EMERGENCY OBSERVATION STATUS REVIEW MINUTES**

Members: CCTW Buena Date: 3/8/14  
Off Grant Place: Close

Prisoner: Condon MDOC #: 2425

**I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Placement form) and any additional information received since placement:**

Offender was placed on Eas for pending investigation

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

**II. Prisoner's Statement**

I don't intend to harm any staff or inmates.
--

☐ Attachment(s), specify: \_\_\_\_\_

**III. Unit Management Team's Decision and Its Reason(s)**

- ☐ Remove from Emergency Observation Status  
☐ Retain on Emergency Observation Status (up to 72 hours from time of placement on emergency observation status)  
☒ Recommend Placement on Administrative Segregation Status

Reason(s): offender is a danger to other inmates and staff based on report.
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☐ Individualized Plan attached.

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**  
3/8/14 at \_\_\_\_\_  
 Date Time

**V. If Unit Management Team recommends placement on administrative segregation status, Chief Administrative Officer's, or Designee's Review**

- ☐ Remove from emergency observation status  
☐ Recommend to Commissioner, or designee, placement on administrative segregation status

Commissioner's, or designee's, Decision ☐ Placement Approved ☐ Placement Denied

Date \_\_\_\_\_

Signature \_\_\_\_\_

EMERGENCY OBSERVATION STATUS REVIEW MINUTES

DOC FORM

A - 15.1 - A - C - 8/19/11

Distribution: Copies to: Prisoner, Shift Commander, Housing Unit's Emergency Observation Status binder, SMU Unit Manager, if applicable

Original: Unit Manager

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: UM Harris	Date: 3/10/14
CO Dolbier	Place: SMU

Prisoner: Condon, J	MDOC: 2425
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- I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement: offender was placed on EOS status pending further investigation by IPS.

*Initial*

*3-17-14*

**RECEIVED**

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

Prisoner states he has no intention on killing any staff. Prisoner swears on his life he has no intention to harm staff or prisoners. Prisoner said it could still go either way 50/50.

☐ Attachment(s) (specify): \_\_\_\_\_

III. Unit Management Team's Decision and Its Reason(s)

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s):  
 Prisoner threaten to kill Unit Manager.

☐ Individualized Plan attached

IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on

3/10/14	at
Date	Time

V. Prisoner informed of his/her right to appeal: ☐ Waived right ☐ Did not waive right

Signature of Prisoner \_\_\_\_\_ Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff *[Signature]* Date *3-10-14*

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature *[Signature]* Date *3-17-14*



MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

Members: UM Harris	Date: 3/10/14
CO Dolbier	Place: SMU

Prisoner: Condon, J	MDOC: 2425
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- I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

offender was placed on EOS status pending further investigation by IPS.

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

Prisoner states he has no intention on killing any staff, Prisoner swears on his life he has no intention to harm staff or prisoners. Prisoner said it could still go either way 50/50.

III. Unit Management Team's Decision and its Reason(s) *I NEVER SAID THAT.*

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s): Prisoner threaten to kill Unit Manager. He's not to prove that.

*(I DISPUTE THAT. IT'S A LIE. AN "ACCUSATION")*

☐ Individualized Plan attached

IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on

3/10/14	at
Date	Time

V. Prisoner informed of his/her right to appeal: ☐ Waived right ☐ Did not waive right

Signature of Prisoner \_\_\_\_\_ Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff *[Signature]* Date *3-10-14*

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature *[Signature]* Date *3-12-14*

*I NEVER SIGNED THIS - NEVER GOT A COPY*

*5/21/14  
REC'D BY  
ME AFTER REQUEST  
BUT I NEVER GOT  
A COPY  
[Signature]  
never signed  
it.*

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: UM Allen, D  
Officer Tarchette

Date: 3-20-14  
Place: SMU

Prisoner: Condon, J MDOC: 2425

Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

*2nd*

<u>IPS investigation.</u>

Prisoner in attendance at review? ☒ Yes ☐ No - If not, reason: \_\_\_\_\_

**II. Prisoner's Statement**

Prisoner states he has no intention of hurting another ~~Prisoner~~ Prisoner or Staff.

☐ Attachment(s) (specify): \_\_\_\_\_

**III. Unit Management Team's Decision and its Reason(s)**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s):  
Pending information from IPS investigation

☐ Individualized Plan attached

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**

\_\_\_\_\_ at \_\_\_\_\_  
Date Time

**V. Prisoner Informed of his/her right to appeal: ☒ Waived right ☐ Did not waive right**

Signature of Prisoner X John Conson Date 3-20-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff \_\_\_\_\_ Date \_\_\_\_\_

**VI. Chief Administrative Officer's or Designee's Review**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature] Date 3/21/14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES  
Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

DOC FORM

A - 15.1 - C - E - 8/19/11R



**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: Sgt. M Burns  
CO - STAPLES

Date: 3-27-14  
Place: SMU

Prisoner: Condon, J. MDOC: 2425

I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

IPS investigation.

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

WOULD LIKE TO GO TO POPULATION - EVEN CPD.

☐ Attachment(s) (specify): \_\_\_\_\_

III. Unit Management Team's Decision and its Reason(s)

- ☒ Remove from administrative segregation status  
☐ Retain on administrative segregation status

Reason(s): HAS NOT BEEN AN ISSUE IN THE SMU.  
WOULD RATHER BE LOCKED DOWN IN POPULATION.  
SMU COULD USE THE CELL HE IS IN.

☐ Individualized Plan attached

IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on

3-27-14 at 0845  
Date Time

V. Prisoner informed of his/her right to appeal: ☒ Waived right ☐ Did not waive right

Signature of Prisoner John Condon Date 3-27-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Sgt. Burns Date 3/27/14

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature \_\_\_\_\_

Date 3-27-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM

A - 15.1 - C - E - 8/19/11R

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: Sgt Burns  
Off Benner  
Det Barter

Date: 4-1-14  
Place: SMU

Prisoner: Cordon J MDOC: 2425

**I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:**

4th

<u>IPS investigation</u>

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

**II. Prisoner's Statement**

<u>Would like to go to GP. "I'm not the same inmate I used to be." I'm 66 years old and want to find an</u>
<u>Attachment(s) (specify): older group in population, and due my time.</u>

**III. Unit Management Team's Decision and its Reason(s)**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s): UNTIL THE ADMINISTRATION WILL RELEASE.  
I BELIEVE CONDON CAME HERE AND HAD A CULTURE SHOCK  
30 YEARS IN THE FEDS DID NOT PREPARE HIM FOR MSP. GP WOULD DO HIM WELL.

☐ Individualized Plan attached

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**

4-1-14 at 6:30  
Date Time

**V. Prisoner informed of his/her right to appeal: ☒ Waived right ☐ Did not waive right**

Signature of Prisoner [Signature] Date 4-1-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Michael Burns Date 4-1-14

**VI. Chief Administrative Officer's or Designee's Review**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature] Date 4-1-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES - DOC FORM

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

A-15.1-C-E-8/19/11R

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: Sgt. Leonard  
etc. Ligenby

Date: 4/14/14  
Place: SMU

Prisoner: Condon J MDOC: 2425

I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

5th  
review

Ongoing investigation.

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

Would like to go to C-Pod close and be locked in there instead of B-wing.
<input type="checkbox"/> Attachment(s) (specify): _____

III. Unit Management Team's Decision and Its Reason(s)

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s):
Refused to go on administrative Control Pod.

☐ Individualized Plan attached

IV. ☐ Prisoner informed of decision and its basis and received a copy of this review form on \_\_\_\_\_ at \_\_\_\_\_ Time \_\_\_\_\_

V. Prisoner informed of his/her right to appeal ☐ Waived right ☒ Did not waive right

Signature of Prisoner [Signature] Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Sgt. Leonard Date 4/14/14

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature] Date 4-15-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES - DOC FORM

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

A-15.1-C-E-8/19/11R

Concur with  
Unit Management Team  
Recommendation  
Promote on Adse  
4-17-14

4-16-14

MAINE DEPARTMENT OF CORRECTIONS  
PRISONER APPEAL OF SPECIAL MANAGEMENT STATUS

Date 4/14/14 Prisoner Name John Condon MDOC # 2425  
- 66 YRS. Old -

TO: Chief Administrative Officer, or designee

On 4/14/14, the following review took place.

SPECIAL MANAGEMENT STATUS

☒ Review of Administrative Segregation status

☐ Review of Protective Custody status

There is NO difference between the treatment & privileges afforded a Disc. seg. inmate and one who is on AD. SEG STATUS.

Appeal must be submitted to the Chief Administrative Officer, or designee, within three (3) working days of receiving the decision.

I wish to appeal for the following reasons: I've been in SMU for 40 days.

NO CHARGES HAVE BEEN BROUGHT - NO EVIDENCE PRESENTED YET I AM UNDER SAME HARSH LOSS OF PRIVILEGES THAT INMATES WHO ARE SERVING DISC. SEG. TIME BECAUSE THERE'S "NO DIFFERENCE" SAYING ACCORDING TO UNIT MGR ALLEN. THEREFORE I AM BEING PUNISHED JUST BECAUSE I AM BEING INVESTIGATED FOR SOMETHING (?) I MAY NOT HAVE DONE OR PERHAPS THERE IS A LOGICAL REASON FOR WHATEVER THE INVESTIGATION IS CONTINUED ON. REQUEST TRANSFER TO C-PAD CLASS WHERE I CAN STILL BE MONITORED

Prisoner's Signature

Receiving Person's Signature


Date & Time

Name & Title (Print)

Department of Corrections


MAINE STATE PRISON

# Memo

To: Prisoner John Condon (2425)  
From: Deputy Warden Ross   
Date: April 17, 2014  
Re: Appeal of Special Management Status

---

I am in receipt of your appeal of Special Management Status. After review of your appeal I concur with your Unit Team's recommendation for you to be on administrative segregation status.

Cc: Unit File 

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: U.M. AllenDate: 4-17-14Off CharltonPlace: SMUDeb BarkerPrisoner: Condon, JMDOC: 2425

*6th review*

I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

TPS investigation.

Threats against UM Harris

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

## II. Prisoner's Statement

Prisoner doesn't intend to harm UM HARRIS.

Prisoner wants to talk to with CAO to confront the

☐ Attachment(s) (specify): Evidence against him.

## III. Unit Management Team's Decision and its Reason(s)

☐ Remove from administrative segregation status☒ Retain on administrative segregation status

Reason(s): Pending possible placement on

administrative controls.

☐ Individualized Plan attachedIV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on

4-17-14 at 14:55 hrs

Date Time

V. Prisoner informed of his/her right to appeal: ☐ Waived right ☒ Did not waive right

Signature of Prisoner [Signature] Date 4-17-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff [Signature] Date 4-17-14

## VI. Chief Administrative Officer's or Designee's Review

☐ Remove from administrative segregation status☒ Retain on administrative segregation statusSignature [Signature]Date 4-22-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file

Original to: Unit Manager

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Rec'd  
4-18-14MAINE DEPARTMENT OF CORRECTIONS  
PRISONER APPEAL OF SPECIAL MANAGEMENT STATUSApril 17, 2014 John Condon  
Date Prisoner Name2425  
MDOC #

TO: Chief Administrative Officer, or designee

On 4/17/14, the following review took place.

## SPECIAL MANAGEMENT STATUS

- ☒ Review of Administrative Segregation status
- ☐ Review of Protective Custody status

Concur with  
Unit Manager's Recommendation  
A return on AD's  
4/22/14

Responded  
4/17/14  
FILE

Appeal must be submitted to the Chief Administrative Officer, or designee, within three (3) working days of receiving the decision.

I wish to appeal for the following reasons: My 6<sup>th</sup> Ad. Seg. Review, like the 1<sup>st</sup> needed to "Retain (me) on Ad. Seg. Status"... pending outcome of IPS investigation." → I rec'd a letter from Lt. Lisa Burnham (Head of IPS) on 4/15/14 stating that she is "NOT AWARE OF ANY PENDING INVESTIGATIONS THAT YOU INVOLVED IN."

SO... FOR 4.5 DAYS I'M BEING HELD IN SEGREGATION PENDING AN IPS INVESTIGATION THAT... ISN'T. SO IF THERE IS NO INVESTIGATION... WHY AM I BEING HELD OR WHAT'S THE CHARGE? & (who's) making it? Request transfer to G-POD CLOSÉ (23 HR lock-up).

Prisoner's Signature John Condon

Receiving Person's Signature -

Date &amp; Time

Name &amp; Title (Print)

\* Rec'd 6<sup>th</sup> Review minutes and appeal from my own 4/29/14

MAINE DEPARTMENT OF CORRECTIONS  
PRISONER APPEAL OF SPECIAL MANAGEMENT STATUS

✓ w/ J. Allen  
OR JEB  
SPATER for veri-  
fication

4/29/14 J. Conner 2425  
Date Prisoner Name MDOC #

TO: Chief Administrative Officer, or designee

On 4/17/14, the following review took place.

Rec'd  
4-30-14  
Cover with  
Unit Ten  
5/1/14

SPECIAL MANAGEMENT STATUS

- ☒ Review of Administrative Segregation status  
☐ Review of Protective Custody status

SEE NOTE

Appeal must be submitted to the Chief Administrative Officer, or designee, within three (3) working days of receiving the decision.

I wish to appeal for the following reasons: I DENY THREATS AGAINST LHM HARRIS.

I HAVE YET TO MEET w/ you. THE "ULTIMATE DECISION MAKER" IN MY STATUS. I HEAR FROM YOU, YET I CANNOT GET YOU TO "HEAR" FROM ME. WHICH WOULD TAKE NOT LONGER THAN THIS APPEAL FORM. I BELIEVE I HAVE A DUE PROCESS RIGHT TO HEAR & BE HEARD (EVIDENCE PRESENTED (WHERE APPROPRIATE) AND MY DEFENSE. THIS AD. SEGREGATION OF MYSELF "IMPOSES ATYPICAL & SIGNIFICANT HARDSHIPS)... IN RELATION TO THE ORDINARY INCIDENTS OF PRISON LIFE (FOR MYSELF)..." SANDON V. CONNER, 515 U.S. 472 484 (95)

Prisoner's Signature

Sherrill Black 5/1/14 1523 Sherrill Black, COURT  
Receiving Person's Signature Date & Time Name & Title (Print)

Give me a chance to defend myself, please.

*\* Rec'd 7/10 Review & minutes only tonight 4/29/14*  
 (✓ w/ D. Allen on  
 Sec BATER for cell-  
 5000

MAINE DEPARTMENT OF CORRECTIONS  
 PRISONER APPEAL OF SPECIAL MANAGEMENT STATUS

4/29/14 John Connor 2425 Rec'd  
 Date Prisoner Name MDOC # 4-30-14

TO: Chief Administrative Officer, or designee

On 4/23/14, the following review took place.

*Concur with  
 Unit Team Recommendation  
 5/2/14*

SPECIAL MANAGEMENT STATUS

- ☒ Review of Administrative Segregation status  
☐ Review of Protective Custody status

*SEE NOTE*

Appeal must be submitted to the Chief Administrative Officer, or designee, within three (3) working days of receiving the decision.

I wish to appeal for the following reasons: NOT HAVING ME PRESENT AT THE REVIEW  
BECAUSE I WAS "NOT NEEDED" IS A

VIOLATION OF THE AD SEG. STATUS Policy #15.1 SECTION VI PROCEDURE, PRO-  
cedure C(2). RETAINING ME ON AD SEG. pending "possible Admin. Controls  
Placement" is MYSTERIOUS. I HAVEN'T HAD A DISC. REPORT/WRITE-UP  
in 12 YEARS EXCEPT for 402 of work in my cell (BICE). 12 YEARS! I  
HAVE A "LIBERTY INTEREST TO NOT ONLY STAY off of AD SEG. STATUS But NOT  
to BE placed in some "Draconian" Admin. Control Unit." For what ???  
Who is making the decisions on me? Where is my "Hearing"? Rec  
of FUNDAMENTAL AMERICAN RT. TO HEAR & BE HEARD ??

I BELIEVE you are being very unfair TO ME. I'm 66 yrs old,  
yes, 20 yrs ago I was wild. I've saved my time for all that:  
5 YRS ADX FLORENCE  
1 COLO.

Sherrin Black 5/14 1523 Sherrin Black, Clerk  
 Receiving Person's Signature Date & Time Name & Title (Print)

*I'm not going to be a problem here for you. put me in C-pod  
 close - REQUEST*

**MISSOURI DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: U.M. Allen  
Sgt Burns

Date: 4-23-14

Place: SMU

Prisoner: Condon, J. MDOC: 2425

**I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:**

Threats towards staff member.  
Investigation.

Prisoner in attendance at review? ☐ Yes ☒ No If not, reason: not needed.

**II. Prisoner's Statement**

☐ Attachment(s) (specify): \_\_\_\_\_

**III. Unit Management Team's Decision and its Reason(s)**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s): Possible Admin. Controls Placement

☐ Individualized Plan attached

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**

4/29/14 at P.M.  
Date Time

**V. Prisoner informed of his/her right to appeal: ☐ Waived right ☐ Did not waive right**

Signature of Prisoner \_\_\_\_\_ Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff \_\_\_\_\_ Date \_\_\_\_\_

**VI. Chief Administrative Officer's or Designee's Review**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature]

Date 4/24/14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM


Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

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Department of Corrections

**MAINE STATE PRISON**

# Memo

To: Prisoner John Condon (2425)  
From: Deputy Warden Ross   
Date: May 2, 2014  
Re: Appeal of Special Management Status

---

I am in receipt of your appeals of Special Management Status. After review of both appeals I concur with your Unit Team's recommendation for you to be on administrative segregation status.

Cc: Unit File 

MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

Members:

Sgt. M Burns

Date:

5-2-14

Place:

SMU

Prisoner:

Condon, J

MDOC:

2425

I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

8th

Threats towards a staff member

Prisoner in attendance at review? ☐ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement


☐ Attachment(s) (specify): \_\_\_\_\_

III. Unit Management Team's Decision and its Reason(s)

☐ Remove from administrative segregation status

☒ Retain on administrative segregation status

Reason(s): Threat may still exist


☐ Individualized Plan attached

IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on

5/2/14 at PM

Date Time

V. Prisoner informed of his/her right to appeal: ☐ Waived right ☒ Did not waive right

Signature of Prisoner \_\_\_\_\_ Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Sgt. M Burns Date 5-2-14

VI. Chief Administrative Officer's or Designee's Review

☐ Remove from administrative segregation status

☒ Retain on administrative segregation status

Signature

Date 5-5-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager


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Department of Corrections

MAINE STATE PRISON

# Memo

To: Prisoner John Condon (2425)  
From: Deputy Warden Ross   
Date: May 12, 2014  
Re: Appeal of Special Management Status

---

I am in receipt of your appeals of Special Management Status. After review of your appeal I concur with your Unit Team's recommendation for you to be on administrative segregation status.

Cc: Unit File ✓

5-7-14

**MAINE DEPARTMENT OF CORRECTIONS  
PRISONER APPEAL OF SPECIAL MANAGEMENT STATUS**

Date 5/3/14 Prisoner Name J. Conson MDOC # 2425

TO: Chief Administrative Officer, or designee

On 5/2/14, the following review took place.

*Request denied*  
*TC*  
*5-12-14*

**SPECIAL MANAGEMENT STATUS**

- ☒ Review of Administrative Segregation status  
☐ Review of Protective Custody status

*8th REVIEW*

Appeal must be submitted to the Chief Administrative Officer, or designee, within three (3) working days of receiving the decision.

I wish to appeal for the following reasons:

W/AN DUE RESPECT, THE AD. SEG. BOARD  
DID NOT ACTUALLY CONSIDER BELIEVING ME.  
IT IS A "HOLLOW FORMALITY." YOU OR THE CAO. ARE THE "ULTIMATE DECISION  
MAKER" ON MY STATUS. I HAVE, AS AN AMERICAN CITIZEN, THE 5<sup>TH</sup> & 14<sup>TH</sup> (A)  
CONSTIT. RIGHT, THE DUE PROCESS RIGHT, TO "HEAR & BE HEARD" BY THE  
ULTIMATE DECISION MAKER ON MY "LIBERTY" INTEREST TO STAY OUT  
OF SEG. AND RE-GAIN THE FREEDOM (LIBERTY) THAT WAS TAKEN AWAY  
FROM ME BY MY REMOVAL FROM "POPULATION" IN MSP. 60 DAYS  
AGO. I'VE YET BEEN AFFORDED THAT RIGHT. REQUEST TRANSFER  
TO A, C, E OR F POS, POPULATION  
-CLOSE-

Prisoner's Signature

Receiving Person's Signature

Date & Time

Name & Title (Print)

ATTACHMENT: Prisoner's Statement:

"With all due respect, this review is a hollow formality. Bond was not actually considered releasing me. I want the ability to protect my views to the person who actually makes the decision on my status. I believe I have the right to 'hear & be heard' by the person who makes the decision on my liberty interests to go back to population. Want to go to C-Pod - Close.

5/2/14

John Gaudin

Deputy Warden Ross  
 I would like you to sit down with  
 me for 5 minutes so I can explain EXACTLY  
 what I SAID TO SEVERAL 3<sup>rd</sup> PARTY INMATES  
 in A private setting that I did not think  
 would go further. These STATEMENTS I MAKE  
 HAVE ~~BE~~ BECOME MIS-CONSTRUED or TWISTED  
 into I "THREATENED TO KILL HOLLY HARRIS." That  
 NOT TRUE. It's JUST NOT TRUE.

I HAVE BEEN WAITING FOR A  
 CHANCE TO EXPLAIN MYSELF -- TO TESTIFY  
 on my own behalf -- NOT TO A SUBCOMMITTEE,  
 BUT TO THE OFFICIALS who HAVE THE ULTIMATE  
 DECISION MAKING POWER over my STATUS.

I DON'T WANT WHAT I SAY TO  
 THEM TO BE MISCONSTRUED or WEAKENED

when the information is relayed to you or to the Warden.

I've been waiting for the "investigation" to be over so I can be formally charged and then present my defense ... But that's NOT the way it is working out.

All I'm asking for is a sit-down for 5-10 minutes to explain myself, honestly & entirely.

Respectfully Submitted

J. CONNOR  
#2425  
SMU - B. 209

(Encl 5's) I SE AD SEY REV. I never got a copy of same by Mr. Mendez. I never said what he wrote down about "50/50" and the reason is a false hood. I did not threaten Holly Harris - I talked about her though.



**MAINE STATE PRISON  
NOTICE OF ADMINISTRATIVE CONTROL STATUS UNIT  
REFERRAL REVIEW**

<b>Prisoner:</b> <u>CONDON, J.</u>	<u>#2425</u>	<u>CLOSE</u>
Name	MDOC #	Unit

Your review is scheduled for \_\_\_\_\_

**Information considered:**

Prisoner Condon, J. #2425 has been sentenced to life in prison for 3 counts of Murder.

[REDACTED]

**DISCIPLINARY INFRACTIONS:**

11/15/13 Prisoner Condon, J. was found guilty of a Class B theft violation, prisoner received 20 days of disciplinary restriction for this offense.

**SUMMARY:**

Prisoner Condon, J #2425 was placed on Administrative Segregation because staff received confidential information that he was going to assault the close custody unit manager. This assault was going to cause serious bodily injury or death to the staff member. Prisoner CONDON has a very minimal incident history and disciplinary history. He was sentence to life in prison for 3 count of murder.




**INTERNAL INVESTIGATIONS:**

  
\_\_\_\_\_  
Deputy Warden of Programs

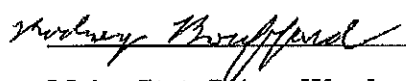
Approved/Disapproved

Date: 5-21-2014

  
\_\_\_\_\_  
Deputy Warden of Operations

Approved/Disapproved

Date: 5-21-14

  
\_\_\_\_\_  
Maine State Prison Warden

Approved/Disapproved

Date: 5/21/14

Distribution: Original-Prisoner

Copies: Associate Commissioner, Maine State Prisoner Warden, Deputy Warden of Operations,  
Deputy Warden of Programs Services, SMU CCTW, Health Services Director, Director of Mental  
Health, File.

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: U.M. Hawlett  
Deb Barter

Date: 5-23-14  
Place: SMU

Prisoner: Condon, J MDOC: 2425

**I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:**

(30 day)

Threats toward a staff member.

Prisoner in attendance at review? ☐ Yes ☒ No If not, reason: Not needed

**II. Prisoner's Statement**


☒ Attachment(s) (specify): Referral Review

**III. Unit Management Team's Decision and its Reason(s)**

- ☒ Remove from administrative segregation status  
☐ Retain on administrative segregation status

Reason(s): <u>Recommend placement in Admin.</u>
<u>Control Unit.</u>

☐ Individualized Plan attached

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**

\_\_\_\_\_ at \_\_\_\_\_  
Date Time

**V. Prisoner informed of his/her right to appeal: ☐ Waived right ☐ Did not waive right**

Signature of Prisoner \_\_\_\_\_ Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff \_\_\_\_\_ Date \_\_\_\_\_

**VI. Chief Administrative Officer's or Designee's Review**

- ☒ Remove from administrative segregation status Planned in ACU  
☐ Retain on administrative segregation status

Signature [Signature]

Date 5-27-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

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**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: W.M. Howlett Date: 6/11/14  
Deb Barter Place: SMU

Prisoner: Condon, J MDOC: 2425

**I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:**

30  
day  
review


Prisoner in attendance at review? ☐ Yes ☒ No If not, reason: Not needed.

**II. Prisoner's Statement**


☐ Attachment(s) (specify): \_\_\_\_\_

**III. Unit Management Team's Decision and its Reason(s)**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s): Pending finalization of the  
Admin. Controls Placement.

☐ Individualized Plan attached

**IV. ☒ Prisoner informed of decision and its basis and received a copy of this review form on**

6/11/14 at \_\_\_\_\_  
Date Time

**V. Prisoner Informed of his/her right to appeal: ☐ Waived right ☒ Did not waive right**

Signature of Prisoner \_\_\_\_\_ Date \_\_\_\_\_

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Capt. John E. Howlett Date 6-11-14

**VI. Chief Administrative Officer's or Designee's Review**

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature] Date 6-12-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES  
Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

DOC FORM

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MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

Members: Um Howlett  
Sgt. Leonard

Date: 6-24-14  
Place: SMU

Prisoner: CONDON IS MDOC: 2425

- I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

Review
--------

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

Being Treated Unfairly, Bring Charges or let him go to G.P.
---

☐ Attachment(s) (specify): \_\_\_\_\_

III. Unit Management Team's Decision and its Reason(s)

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s):

Pending Review To Admin Control Placement.
--

☐ Individualized Plan attached

IV. ☐ Prisoner informed of decision and its basis and received a copy of this review form on \_\_\_\_\_ at \_\_\_\_\_ Time \_\_\_\_\_

V. Prisoner Informed of his/her right to appeal: ☐ Waived right ☒ Did not waive right

Signature of Prisoner: [Signature] Date 6-24-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff: [Signature] Date 6-24-14

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature: [Signature] Date 6-25-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM

A-15.1-C-E-8/19/11R

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

**MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES**

Members: CPT HawlettDate: 7/30/14Sgt LeonardPlace: SMUCOTW DuperrePrisoner: Condon, J.MDOC: 2425

- I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

30  
day

Review of Ad-seg Status

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

## II. Prisoner's Statement

Still pleading not guilty to threatening charge and wishes it would be adjudicated
--

☐ Attachment(s) (specify): \_\_\_\_\_

## III. Unit Management Team's Decision and its Reason(s)

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s): Pending review to Admin Control Placement☐ Individualized Plan attachedIV. ☒ Prisoner informed of decision and its basis and received a copy of this review form onDate 7-30-14 at 1520 TimeV. Prisoner informed of his/her right to appeal ☐ Waived right ☒ Did not waive rightSignature of Prisoner X [Signature] Date 7-30-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Capt. Hawlett Date 7-30-14

## VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature]Date 8-4-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

DOC FORM

Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
Original to: Unit Manager

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**STATE OF MAINE  
DEPARTMENT OF CORRECTIONS**

**48 HOUR NOTICE OF REVIEW OF STATUS**

8/29/14 Condon, J 2425  
Date Prisoner Name MDOC #

This 48 hour notice is provided to inform you of your upcoming review for the following purpose:

**SPECIAL MANAGEMENT STATUS**

- ☒ Review of Administrative Segregation status  
☐ Review of Protective Custody status

The review is scheduled for: Sept. 29, 2014  
Date and Time

This 48 hour notice may be waived by you in writing. If you choose to waive the 48 hour notice, please note below:

☐ I choose to waive the 48 hour notice requirement for this review.

[Signature]  
Prisoner's signature

8/29/14  
Date

Unless your behavior warrants otherwise, you are urged to personally attend all reviews. If you decline to attend a review, you may sign the waiver statement below and return this notice to your Correctional Care & Treatment Worker or Correctional Caseworker. Regardless of whether you personally appear or decline to appear, you may submit written comments to the unit management team prior to the review date. Assistance is available by contacting your Correctional Care & Treatment Worker or Correctional Caseworker.

☐ I decline to personally appear at my scheduled review.

[Signature]  
Prisoner's signature

8/29/14  
Date

Michael Burns  
Witness of Notification

8/29/14  
Date

1004  
Time



MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

Members: Sgt. Burns Date: 8/29/2014  
D. BARTER Place: SMU  
F. BURNS  
 Prisoner: Condon, J MDOC: 2425

I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

30 day review

Review.

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

I AM STILL UNDER INVESTIGATION FOR ALLEGED THREATS TO STAFF
THE ADMINISTRATION HAS FOUND ME GUILTY, WITHOUT ANY DISCIPLINARY PROCEEDING

☒ Attachment(s) (specify): \_\_\_\_\_

III. Unit Management Team's Decision and its Reason(s)

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s): <u>AD306 PENDING ACU POLICY</u>

☒ Individualized Plan attached NA

IV. ☐ Prisoner informed of decision and its basis and received a copy of this review form on

8/29/14 at PM  
 Date Time

V. Prisoner informed of his/her right to appeal: ☐ Waived right ☒ Did not waive right

Signature of Prisoner [Signature] Date 8/29/14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Michael Burns Date 8.29.2014

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature] Date 8-29-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES DOC FORM  
 Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
 Original to: Unit Manager

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COMMISSIONER'S SIX MONTHLY REVIEW OF ADMINISTRATIVE  
SEGREGATION STATUS

TO: Commissioner, Department of Corrections

FROM: Deputy Warden Troy Ross  
Warden, Superintendent, or Designee ☒ MSP ☐ MCC

RE: Prisoner Condon J MDOC # 2425

The above named prisoner has been on administrative segregation status for the past six (6) months. Approval is requested to retain the prisoner on Administrative Segregation Status because:

☐ The prisoner's behavior may constitute an escape risk if in a less restrictive status, specifically, \_\_\_\_\_

☒ The prisoner's behavior may pose a threat to the safety of others if in a less restrictive status, specifically, Investigation by IPS for possible threats towards staff.

☐ The prisoner's behavior may pose a threat to his/her own safety, if in a less restrictive status, specifically, \_\_\_\_\_

☐ There may be a threat to the safety of the prisoner, if in a less restrictive status, specifically, \_\_\_\_\_

DECISION: ☒ APPROVED ☐ DENIED REASON: \_\_\_\_\_

[Signature]  
Signature, Commissioner

DATE AND TIME DECISION RECEIVED AT FACILITY: 2-8-18 12:50

DECISION RECEIVED AT FACILITY BY: [Signature]  
Printed Name / Signature

MAINE DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES

Members: Capt. Howlett Date: 9-29-14  
Sgt. Leonard Place: SMU  
Off. Hunter Harding  
 Prisoner: Condon, J MDOC: 2425

- I. Reason(s) and Factual Basis for Placement (from Emergency Observation Status Review Minutes and Administrative Segregation Status Placement form) and any additional information received since placement:

Review - Pending results of Investigation  
of threats toward staff.

Prisoner in attendance at review? ☒ Yes ☐ No If not, reason: \_\_\_\_\_

II. Prisoner's Statement

I would like to know results of investigation.  
It has been over 6 months.

☐ Attachment(s) (specify): \_\_\_\_\_

III. Unit Management Team's Decision and its Reason(s)

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Reason(s):

Pend I have Results of Investigation

☒ Individualized Plan attached

- IV. ☐ Prisoner informed of decision and its basis and received a copy of this review form on

9-29-14 at 1430  
 Date Time

- V. Prisoner informed of his/her right to appeal: ☐ Waived right ☒ Did not waive right

Signature of Prisoner John Condon Date 9-29-14

If prisoner does not waive his/her right to appeal, note receipt by prisoner of this form and of appeal form.

Signature of Staff Capt. Howlett Date 9-29-14

VI. Chief Administrative Officer's or Designee's Review

- ☐ Remove from administrative segregation status  
☒ Retain on administrative segregation status

Signature [Signature] Date 9-30-14

ADMINISTRATIVE SEGREGATION STATUS REVIEW MINUTES  
 Distribution: Copies to: Prisoner, Classification, Caseworker, Prisoner's file  
 Original to: Unit Manager

DOC FORM

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